

## Pool of Fame Nomination Form

**1. Nominee:** *(fill in any available information)*

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Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email: \_\_\_\_\_  
 City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Nominee Deceased:      Y/N      If yes, please fill out the following:

Name of person to accept on nominee's behalf: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/ P.C.: \_\_\_\_\_

**2. Category:** *(Please check appropriate category)*

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\_\_\_\_\_ Competitor

Shall be chosen on the basis of their abilities, sportsmanship, character, and their contribution to the BCSSA, its good reputation and to aquatics in general

\_\_\_\_\_ Builder

A builder is a coach, trainer, manager, official, administrator, volunteer, facility/program developer, or media member, but, is not a professional promoter, sponsor or fundraiser in the employ of BCSSA. A builder may be currently either active or inactive.

\_\_\_\_\_ Newsmaker

Candidates must have concluded their careers as active athletes for a minimum of three aquatic seasons before their election except for outstanding pre-eminence and skill.

**3. Nominator:**

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Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email: \_\_\_\_\_  
 City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Relationship to Nominee: \_\_\_\_\_  
 Position/History with BCSSA: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_



BC Summer Swimming Association  
SWIMMING | DIVING | WATER POLO | ARTISTIC

**4. History with BCSSA** (Year started, role, accomplishments, etc. Include dates and locations.)

- \_\_\_\_\_  
- \_\_\_\_\_  
- \_\_\_\_\_  
- \_\_\_\_\_

**5. Achievements** (Local, Provincial, National, International)

- \_\_\_\_\_  
- \_\_\_\_\_  
- \_\_\_\_\_  
- \_\_\_\_\_

**6. Additional Recognition:**

- \_\_\_\_\_  
- \_\_\_\_\_  
- \_\_\_\_\_  
- \_\_\_\_\_

**7. Significant Contacts:** (someone who can provide a detailed reference)

A. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Relationship to Nominee: \_\_\_\_\_

B. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Please feel free to add further information on an additional sheet.**

**Deadline for Submission: July 1 of each year**

**Please Submit To:**

BC Summer Swimming Association  
#205 – 2323 Boundary Road, Vancouver, BC V5M 4V8  
E: office@bcsummerswimming.com